PTO/SB/21 (05-03)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)			ation Number	09/381,243			
			Date	January 21, 2000			
			lamed Inventor	Charles R. HASKINS 3628			
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		Exami	iner Name	P. KANOF			
otal Number of Pages in This Submission 27			ey Docket Number	CITI0058-US			
	ENCLO	SURES	(check all that apply)				
Fee Transmittal Form		ment Par		After Allowance Communication to Group			
☐ Fee Attached	☐ Drawin	g(s)		Appeal Communication to Board of Appeals and Interferences			
Amendment / Response	Licensi	ng-relate	ed Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)			
After Final	Petition			Proprietary Information			
Affidavits/declaration(s)	Petition to Convert to a Provisional Application			Status Letter			
Extension of Time Request	Power of Attorney, Revocation Change of Correspondence Address			Other Enclosure(s) (please identify below):			
Express Abandonment Request	☐ Terminal Disclaimer ☐ Request for Refund						
☐ Information Disclosure Statement	CD, Number of CD(s)			1			
Certified Copy of Priority Document(s)	Rema	rks		G M			

HOUP 36 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm 3,014 Individual name Signature Date

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53

Signature

Date

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FEE	TRA	AN:	SMI	TT	AL
•	for l	FY	200	3	

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

	Complete if Known	Johns
Application Number	09/381,243	.C.
Filing Date	January 21, 2000	DEC 0 9 2003 iu
First Named Inventor	Charles R. HASKINS	
Examiner Name	P. KANOF	3
Art Unit	3628	RADEMAR
Attorney Docket No	CITI0058-US	

TOTAL AMOU	THE CONTRACTOR				cy book				
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)					
				3. ADI	DITIONAL	FEES		· 	_
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order				<u>Large</u>	Entity	Small [ntity		
Deposit Accou	nt:		.	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Deposit Account	501458			1051	130	2051	65	Surcharge - late filing fee or oath	
Number				1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Deposit			1	1053	130	1053	130	Non-English specification	
Account	KILPATRICK ST	OCKTON LLP		1812	2,520	1812	2,520	For filing a request for reexamination	
Name	thorized to: (ch	eck all that apply)		1804	920°	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) i	ndicated below	Credit any overpayments ring the pendency of this application	- 1	1805	1,840*	1805	1,8401	Requesting publication of SIR after Examiner action	
		except for the filing fee		1251	110	2251	55	Extension for reply within first month	
to the above-ident		ount.	\dashv	1252	410	2252	205	Extension for reply within second month	
				1253	930	2253	465	Extension for reply within third month	950
	Small Entity			1254	1,450	2254	725	Extension for reply within fourth month	
		ee Description Fee Paid		1255	1,970	2255	985	Extension for reply within fifth month	
	ode (\$)		- I	1401	320	2401	160	Notice of Appeal	-
		Itility filing fee		1402	320	2402	160	Filing a brief in support of an appeal	<u> </u>
		Design filing fee		1403	280	2403	140	Request for oral hearing	
		Plant filing fee Reissue filing fee	- I	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1005 160 2	005 80 P	rovisional filling fee	J Į	1452	110	2452	55	Petition to revive – unavoidable	W
	SUBTOTAL	(1) (\$) 0		1453	1,300	2453	650	Petition to revive – unintentional	7
	SUBICIAL	(1)	- I	1501	1,300	2501	650	Utility issue fee (or reissue)	
2. EXTRA CLAIM	FEES			1502	470	2502	235	Design issue fee	
		Extra Fee from Fee		1503	630	2503	315	Plant issue fee	
Tatal Claims		Claims below Paid 0 X = 0	- I	1460	130	1460	130	Petitions to the Commissioner	UP
Total Claims		· ^	╡┃	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
Independent Claims	-3 ** =	0 X = 0	╛╽	1806	180	1806	180	Submission of Information Disclosure Stmt	6
Multiple Dependent Large Entity	ı Small Entity	X = 0]	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	3000
Fee Fee	Fee Fee		l	1809	750	2809	375	Filing a submission after final rejection	
Code (\$)	Code (\$)	Fee Description	l	.000	, 55	2000	5.5	(37 CFR § 1.129(a))	
1202 18	2202 9	Claims in excess of 20	· [1810	750	2810	375	For each additional invention to be	
1201 84	2201 42	Independent claims in excess of 3						examined (37 CFR § 1.129(b))	
1203 280	2203 140	Multiple dependent claim, if not pa	iid	1801	750	2801	375	Request for Continued Examination (RCE)	,
1204 84	2204 42	** Reissue independent claims ove original patent	er	1802	900	1802	900	Request for expedited examination of a design application	
1205 18	2205 9	** Reissue claims in excess of 20 over original patent	and	Out		• •		or a design application	
	SUI	BTOTAL (2) (\$) 0	7 	Other fo	ee (speci	ту)	•		
			」	*Redu	ced by B	asic Filin	g Fee F	Paid SUBTOTAL (3) (\$) 95	0
**or number prev	iously paid, if are	eater; For Reissues, see above	- 1					[1,4/-	

SUBMITTED BY		1			Cor	nplete (if applicable)
Name (Print/Type)	seorge	T. Marcov	Registration No. Attorney/Agent)	33,014	Telephone	202 508 5800
Signature					Date 1	/03

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